



FH
[REDACTED]

STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of

[REDACTED]

DECISION

FOO/145478

PRELIMINARY RECITALS

Pursuant to a petition filed November 20, 2012, under Wis. Admin. Code § HA 3.03(1), to review a decision by the Ozaukee County Department of Social Services in regard to FoodShare benefits (FS), a hearing was held on January 8, 2013, at Port Washington, Wisconsin.

The issue for determination is whether the agency properly reduced petitioner's FoodShare allotment.

There appeared at that time and place the following persons:

PARTIES IN INTEREST:

Petitioner:

[REDACTED]

Respondent:

Department of Health Services
1 West Wilson Street
Madison, Wisconsin 53703

By: Pahoua Vang, ESS

Ozaukee County Department of Social Services
121 W. Main Street
PO Box 994
Port Washington, WI 53074 -0994

ADMINISTRATIVE LAW JUDGE:

Michael A. Greene

Division of Hearings and Appeals

FINDINGS OF FACT

1. Petitioner (CARES # [REDACTED]) is a resident of Ozaukee County.
2. Prior to December 1, 2012, petitioner was receiving \$200 per month in FoodShare (FS) benefits.

3. On November 10, 2012, the agency received information that petitioner had qualified for Social Security benefits in the amount of \$1,037 per month . As a result, petitioner's FS benefits were reduced from \$200 to \$16 per month (Exhibit 2).
4. On November 12, 2012, the agency sent petitioner a notice of decision advising her of the reduction in her FS benefits (Exhibit 1).

DISCUSSION

FoodShare (FS) is a joint federal-state program that is intended to improve the overall health of lower income households by enhancing their access to food. Eligibility and benefit levels generally depend upon household size and income with the monthly allotment decreasing as income rises. Benefit levels are determined according to a formula as to which the worker has no discretion, *FoodShare Handbook*, Table 8.1.2.

In this case the petitioner was receiving the maximum allotment for a single-member household because she had no income. When she began receiving Social Security, she had countable income which had to be considered in determining her benefit level, 7 CFR §273.9(b)(2)(ii). The agency properly applied income and the appropriate deductions to her situation and correctly determined that she was eligible for \$16 per month.

I note that since petitioner is categorically eligible for FS benefits, she may deduct remedial medical expenses from her income and that this process was underway at the time of hearing. Those deductions may provide some of the relief that petitioner seeks.

CONCLUSIONS OF LAW

The agency correctly determined petitioner's benefit level based on her income and reported deductions.

THEREFORE, it is

ORDERED

That the petition for review herein be and hereby is dismissed.

REQUEST FOR A REHEARING

This is a final administrative decision. If you think this decision is based on a serious mistake in the facts or the law, you may request a rehearing. You may also ask for a rehearing if you have found new evidence which would change the decision. Your request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and tell why you did not have it at your first hearing. If you do not explain these things, your request will have to be denied.

To ask for a rehearing, send a written request to the Division of Hearings and Appeals, P.O. Box 7875, Madison, WI 53707-7875. Send a copy of your request to the other people named in this decision as "PARTIES IN INTEREST." Your request for a rehearing must be received no later than 20 days after the date of the decision. Late requests cannot be granted.

The process for asking for a rehearing is in Wis. Stat. § 227.49. A copy of the statutes can be found at your local library or courthouse.

APPEAL TO COURT

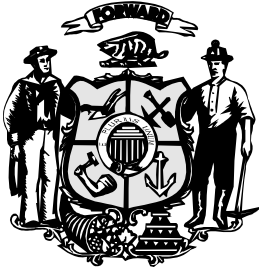
You may also appeal this decision to Circuit Court in the county where you live. Appeals must be served and filed with the appropriate court no more than 30 days after the date of this hearing decision (or 30 days after a denial of rehearing, if you ask for one).

For purposes of appeal to circuit court, the Respondent in this matter is the Department of Health Services. After filing the appeal with the appropriate court, it must be served on the Secretary of that Department, either personally or by certified mail. The address of the Department is: 1 West Wilson Street, Madison, Wisconsin 53703. A copy should also be sent to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400.

The appeal must also be served on the other "PARTIES IN INTEREST" named in this decision. The process for appeals to the Circuit Court is in Wis. Stat. §§ 227.52 and 227.53.

Given under my hand at the City of Milwaukee,
Wisconsin, this 18th day of January, 2013

\sMichael A. Greene
Administrative Law Judge
Division of Hearings and Appeals



State of Wisconsin\DIVISION OF HEARINGS AND APPEALS

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The preceding decision was sent to the following parties on January 18, 2013.

Ozaukee County Department of Social Services
Division of Health Care Access and Accountability